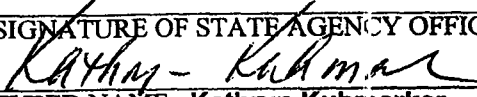



TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL		1. TRANSMITTAL NUMBER: 03-43	2. STATE New York
FOR: HEALTH CARE FINANCING ADMINISTRATION		3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES		4. PROPOSED EFFECTIVE DATE July 1, 2003	
5. TYPE OF PLAN MATERIAL (Check One): <input type="checkbox"/> NEW STATE PLAN <input type="checkbox"/> AMENDMENT TO BE CONSIDERED AS NEW PLAN <input checked="" type="checkbox"/> AMENDMENT			
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)			
6. FEDERAL STATUTE/REGULATION CITATION: 42 CFR 447.204		7. FEDERAL BUDGET IMPACT: a. FFY 07/01/03 – 09/30/03 \$7,000,000. b. FFY 10/01/03 – 09/30/04 \$28,750,000.	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Attachment 4.19-B, Pages 4(a)(vi) and 6(A)(ii)		9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Attachment 4.19-B, Pages 4(a)(vi) and 6(A)(ii)	
10. SUBJECT OF AMENDMENT: Non-Institutional Services: Certified Home Health & Personal Care Services			
11. GOVERNOR'S REVIEW (Check One): <input type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <input type="checkbox"/> OTHER, AS SPECIFIED: <input checked="" type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED <input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL			
12. SIGNATURE OF STATE AGENCY OFFICIAL: 		16. RETURN TO: New York State Department of Health, Corning Tower, Empire State Plaza, Room 1466 Albany, New York 12237	
13. TYPED NAME: Kathryn Kuhmerker			
14. TITLE: Deputy Commissioner Department of Health			
15. DATE SUBMITTED: September 26, 2003			
FOR REGIONAL OFFICE USE ONLY			
17. DATE RECEIVED:		18. DATE APPROVED: December 30, 2003	
PLAN APPROVED - ONE COPY ATTACHED			
19. EFFECTIVE DATE OF APPROVED MATERIAL: July 1, 2003		20. SIGNATURE OF REGIONAL OFFICIAL: 	
21. TYPED NAME: Sue Kelly		22. TITLE: Associate Regional Administrator Division of Medicaid and State Operations	
23. REMARKS:			

Certified Home Health Care Agency – Insurance Demonstration

The Commissioner of Health is authorized to establish one or more demonstration programs for the purpose of providing additional knowledge and experience in mechanisms to provide, maintain or subsidize health insurance coverage for [unemployed] uninsured and [underemployed] underinsured health care workers.

With respect to this demonstration, the Commissioner of Health may solicit and accept applications for participation in the demonstration program from an employer, or group of employers, of home care workers, who are employed in cities and counties within the state which have populations in excess of one million persons, and whose employers provide services primarily to medical assistance recipients, if the following conditions are met: (a) at least fifty percent of the persons receiving services from such employers are recipients of medical assistance; (b) the employer contributes to a group health insurance plan or employer based group health plan on behalf of such employees; and (c) no benefits are provided under the group health insurance plan or employer based group health plan in excess of the benefits provided to the majority of hospital workers in the community in which the home health care workers are employed.

Payments made by governmental agencies for certified home health agency services provided in this demonstration may include, in the aggregate, and on an annual basis, no more than \$58,000,000 which shall be distributed among providers of services approved to participate in this demonstration program to assure availability of comparable health insurance for their employees. Notwithstanding any inconsistent provision of law, such adjustments may be made to rates of payment or as aggregate payments to an eligible provider.

The Commissioner may modify the amounts made available for any specific annual period so long as the total amount made available for the period of the demonstration is not exceeded. The maximum period of the demonstration is January 1, 2000 – June 30, [2003] 2005.

The Commissioner of Health is authorized to require group health insurance plans and employer based group health plans to report to the Department, insofar as such reporting does not violate any provisions the Federal Employee Retirement Income Security Act (ERISA), at such times and in such manner as the Commissioner shall decide, any information needed to operate such a demonstration project, including but not limited to, the number of people in such plans who become ineligible each month for the continuation coverage described herein. In addition, every certified health maintenance organization and every insurer licensed by the Superintendent of Insurance shall submit reports in such form and at such times as may be required to implement this demonstration.

TN 03-43 Approval Date DEC 30 2003
Supersedes TN 00-05 Effective Date JUL 01 2003

New York
6(A)(ii)

Attachment 4.19-B
(07/03)

OFFICIAL

Personal Care Agency – Insurance Demonstration

The Commissioner of Health is authorized to establish one or more demonstration programs for the purpose of providing additional knowledge and experience in mechanisms to provide, maintain or subsidize health insurance coverage for [unemployed] uninsured and [underemployed] underinsured health care workers.

With respect to this demonstration, the Commissioner of Health may solicit and accept applications for participation in the demonstration program from an employer, or group of employers, of personal care workers, who are employed in cities and counties within the state which have populations in excess of one million persons, and whose employers provide services primarily to medical assistance recipients, if the following conditions are met: (a) at least fifty percent of the persons receiving services from such employers are recipients of medical assistance; (b) the employer contributes to a group health insurance plan or employer based group health plan on behalf of such employees; and (c) no benefits are provided under the group health insurance plan or employer based group health plan in excess of the benefits provided to the majority of hospital workers in the community in which the personal care workers are employed.

Payments made by governmental agencies for personal care agency services provided in the demonstration may include, in the aggregate, and on an annual basis, no more than \$58,000,000 which shall be distributed among providers of services approved to participate in this demonstration program to assure availability of comparable health insurance for their employees. Notwithstanding any inconsistent provision of law, such adjustments may be made to rates of payment or as aggregate payments to an eligible provider.

The Commissioner may modify the amounts made available for any specific annual period so long as the total amount made available for the period of the demonstration is not exceeded. The maximum period of the demonstration is January 1, 2000 – June 30, [2003] 2005.

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TN **03-43** Approval Date DEC 30 2003
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